


Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div>2011</div>
	▶ The organization may have to use a copy of this return to satisfy state reporting requirements	Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012		D Employer identification number 52-1340267	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization INTERNATIONAL REPUBLICAN INSTITUTE		E Telephone number (202) 408-9450
	Doing Business As		G Gross receipts \$ 66,220,996
	Number and street (or P O box if mail is not delivered to street address) 1225 EYE STREET NW NO 700	Room/suite	
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		
	F Name and address of principal officer LORNE W CRANER 1225 EYE STREET NW NO 700 WASHINGTON, DC 20005		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀(Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	H(c) Group exemption number ▶
J Website: ▶ WWW IRI ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1983	M State of legal domicile DC

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities ADVANCE FREEDOM AND DEMOCRACY WORLDWIDE DEVELOPING POLITICAL PARTIES, CIVIC INSTITUTIONS, OPEN ELECTIONS, DEMOCRATIC GOVERNANCE AND THE RULE OF LAW		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	254
6 Total number of volunteers (estimate if necessary)	6	180	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	75,493,223	66,192,563
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,331	1,114
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-59,889	-68,520
		75,434,665	66,125,157
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,586,872	3,428,181
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	17,275,587	17,182,538
	16a Professional fundraising fees (Part IX, column (A), line 11e)	37,500	31,500
	b Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 31,500		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	55,486,259	45,786,795
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	75,386,218	66,429,014
	19 Revenue less expenses Subtract line 18 from line 12	48,447	-303,857
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		10,475,459	10,063,128
21 Total liabilities (Part X, line 26)		7,634,392	7,525,918
22 Net assets or fund balances Subtract line 21 from line 20		2,841,067	2,537,210

Part II		Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has knowledge.			
Sign Here	<div>*****</div> <div>Signature of officer</div>		
	<div>LORNE W CRANER PRESIDENT</div> <div>Type or print name and title</div>		
Paid Preparer's Use Only	<div>Preparer's signature</div> <div>YONG ZHANG CPA</div>		Date
	<div>Firm's name (or yours if self-employed), address, and ZIP + 4</div> <div>MCGLADREY LLP</div> <div>8000 TOWERS CRESCENT DR STE 500</div> <div>VIENNA, VA 221826205</div>		

Part IIISTatement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

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1

Briefly describe the organization's mission

IRI ADVANCES FREEDOM AND DEMOCRACY WORLDWIDE BY DEVELOPING POLITICAL PARTIES, CIVIC INSTITUTIONS, OPEN ELECTIONS, DEMOCRATIC GOVERNANCE AND THE RULE OF LAW

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 4,651,279 including grants of \$) (Revenue \$)
	IRAQ DEMOCRACY AND GOVERNANCE INITIATIVES (DOS S-LMAQM-11-GR-515 AND S-LMAQM-12-AC-1043-6987)UNDER THIS GRANT, IRI SUPPORTED DEMOCRATIC GOVERNANCE IN IRAQ WORKING WITH THE COUNTRY'S CITIZENS AND ELECTED OFFICIALS IRI DID THIS BY OFFERING CAPACITY BUILDING WORKSHOPS AT THE NATIONAL AND LOCAL LEVEL FOR ELECTED OFFICIALS AND BY ENCOURAGING THE CONTINUED DEVELOPMENT OF A VIBRANT CIVIL SOCIETY IRI SUPPORTED 386 TOWN-HALL MEETINGS AND 53 CITIZEN POLICY FORUMS ACROSS THE COUNTRY REACHING NEARLY 20,000 IRAQIS AND FACILITATING DIALOGUE BETWEEN IRAQI ELECTED OFFICIALS AND THEIR CONSTITUENTS TO INCREASE THE TRANSPARENCY AND RESPONSIVENESS OF ALL LEVELS OF THE IRAQI GOVERNMENT, IRI WORKED WITH LOCAL GOVERNMENTS, SUCH AS PROVINCIAL GOVERNMENTS, ENABLING ELECTED OFFICIALS WHO ARE CLOSEST TO CITIZENS TO INITIATE REAL CHANGE IN PUBLIC POLICY IRI HOSTED WORKSHOPS AND CONFERENCES FOR PROVINCIAL COUNCILORS WHERE OFFICIALS CAME TOGETHER TO DRAFT LEGISLATION AND PROVINCIAL ACTION PLANS THAT MET THE DEMANDS OF CONSTITUENTS THIS GRANT CONCLUDED ALL ACTIVITIES ON DECEMBER 31, 2012

4b	(Code) (Expenses \$ 4,454,697 including grants of \$) (Revenue \$)
	SOUTH SUDAN POLITICAL PARTIES AS INSTITUTIONS OF DEMOCRATIC GOVERNANCE (USAID DFD-A-00-08-00350-8045)THROUGH WORKSHOPS AND SEMINARS, IRI WORKS WITH SOUTH SUDAN'S POLITICAL PARTIES AS THEY STRENGTHEN THEIR ORGANIZATIONS TO BETTER REPRESENT THEIR MEMBERS, WORKS WITH WOMAN AND YOUTH TO INCREASE THEIR PARTICIPATION IN THE POLITICAL PROCESS, WORKS WITH MEMBERS AND STAFF OF THE NATIONAL LEGISLATIVE ASSEMBLY TO STRENGTHEN THEIR CAPACITY TO REPRESENT THEIR CONSTITUENTS IRI ALSO CONDUCTS NONPARTISAN PUBLIC OPINION RESEARCH TO PROVIDE SOUTH SUDAN'S POLITICAL PARTIES, GOVERNMENT OFFICIALS AND CITIZENS WITH INDEPENDENT DATA ON ISSUES SUCH AS GOVERNMENT PRIORITIES, VOTING BEHAVIORS AND ATTITUDES TOWARD DEMOCRACY, ATTITUDES TOWARD WOMEN AND GENERAL DEMOGRAPHICS OF THE COUNTRY'S PEOPLE LEADING UP TO THE JANUARY 2011 REFERENDUM, IRI TRAINED POLITICAL PARTY AGENTS ON THEIR RIGHTS AND RESPONSIBILITIES AS OBSERVERS DURING THE REFERENDUM IRI HOSTED TRAININGS IN ALL 10 STATES AND 78 COUNTIES, TRAINING MORE THAN 9,000 OBSERVERS

4c	(Code) (Expenses \$ 3,099,150 including grants of \$) (Revenue \$)
	INCREASED ELECTORAL PARTICIPATION IN AFGHANISTAN (USAID 306-A-00-08-00529-00 8180)THROUGH TOWN-HALL MEETINGS, CIVIC EDUCATION WORKSHOPS AND IRI'S AFGHAN LEADERSHIP ACADEMY, IRI WORKS WITH CIVIL SOCIETY GROUPS SO THEY ARE ABLE TO IMPLEMENT CAMPAIGNS FOR GREATER LOCAL AND NATIONAL GOVERNMENT ACCOUNTABILITY IRI ALSO ENCOURAGES INCREASED ELECTORAL PARTICIPATION BY WORKING WITH INDEPENDENT CANDIDATES AND ISSUE-BASED COALITIONS AS THEY DEVELOP CAMPAIGNS THAT ADDRESS CITIZENS' CONCERNS

	(Code) (Expenses \$ 44,046,798 including grants of \$ 3,428,181) (Revenue \$)
	OTHER PROGRAM SERVICES IRI HAS PROJECTS ONGOING THROUGHOUT THE WORLD OTHER SIGNIFICANT PROGRAM SERVICES INCLUDE WORK IN NIGERIA, AND SUDAN

4d

Other program services (Describe in Schedule O)

(Expenses \$ 44,046,798 including grants of \$ 3,428,181) (Revenue \$)

4e

Total program service expenses

\$ 56,251,924

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV.	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Check if Schedule O contains a response to any question in this Part V ☒

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Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	27		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	27
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶AK , AL , AR , AZ , CA , CO , CT , FL , GA , IL , KS , KY , MA , MD , ME , MI , MN , MS , NC , ND , NH , NJ , NM , NY , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WI , WV , DC , HI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ SONYA VEKSTEIN COO 1225 EYE STREET NW SUITE 700 WASHINGTON, DC 20005 (202) 408-9450

Check if Schedule O contains a response to any question in this Part VII

☐ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

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Part VII

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,655,582	0	360,278

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization: 39

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ARDAN ENERGY SERVICES PO BOX 262286 DUBAI AE	SECURITY	3,071,001
PILGRIMS GROUP LIMITED LINKS BUSINESS CENTRE OLD WOKING R WOKING, SURRY UK	SECURITY	2,890,334
XE SERVICES PO BOX 1029 MOYCOCK, NC 27958	SECURITY	1,188,876
GREYSTONE LIMITED WHITEPARK HOUSE WHITEPARK RD BRDIGETOWN BB	SECURITY	908,903
LAPIS LIMITED WAZIR AKBAR KHA KABUL AF	PUBLIC OPINION RESEARCH	716,871

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶30

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	318,828			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	65,718,482			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	155,253			
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f		66,192,563			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,114		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)					
8a		Gross income from fundraising events (not including \$ 318,828 of contributions reported on line 1c) See Part IV, line 18	a	27,319			
b		Less direct expenses	b	95,839			
c		Net income or (loss) from fundraising events . .		-68,520			-68,520
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . .					
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . .					
		Miscellaneous Revenue	Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		66,125,157	0	0	-67,406	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	3,428,181	3,428,181		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,309,493	937,079	372,414	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	10,940,891	7,633,146	3,307,745	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,168,594	821,454	347,140	
9	Other employee benefits	2,677,010	1,855,786	821,224	
10	Payroll taxes	1,086,550	763,782	322,768	
11	Fees for services (non-employees)				
a	Management				
b	Legal	555,696	283,353	272,343	
c	Accounting	232,832	46,772	186,060	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	31,500			31,500
f	Investment management fees				
g	Other	8,948,517	8,822,720	125,797	
12	Advertising and promotion	15,737	12,017	3,720	
13	Office expenses	2,322,059	2,107,729	214,330	
14	Information technology	596,872	286,045	310,827	
15	Royalties				
16	Occupancy	6,253,096	4,035,526	2,217,570	
17	Travel	11,276,395	10,784,753	491,642	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,718,125	2,664,035	54,090	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	321,899		321,899	
23	Insurance	409,046	84,502	324,544	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	FIELD OFFICE	5,241,458	5,173,039	68,419	
b	SECURITY SERVICES	2,647,881	2,647,881		
c	POLLING	2,225,774	2,225,774		
d	EQUIPMENT RENTAL/MAINTE	1,437,578	1,273,790	163,788	
e					
f	All other expenses	583,830	364,560	219,270	
25	Total functional expenses. Add lines 1 through 24f	66,429,014	56,251,924	10,145,590	31,500
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			4,600	1	4,600
	2	Savings and temporary cash investments			5,030,795	2	4,578,654
	3	Pledges and grants receivable, net			2,019,118	3	2,563,491
	4	Accounts receivable, net			1,420,520	4	1,495,799
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			991,286	9	712,607
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,966,224			
	b	Less accumulated depreciation	10b	1,610,158	658,110	10c	356,066
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			351,030	15	351,911
	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,475,459	16	10,063,128
Liabilities	17	Accounts payable and accrued expenses			4,036,370	17	3,882,352
	18	Grants payable			1,080,872	18	1,776,733
	19	Deferred revenue			1,960,624	19	1,309,956
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			556,526	25	556,877
	26	Total liabilities. Add lines 17 through 25			7,634,392	26	7,525,918
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			2,705,833	27	2,398,590
	28	Temporarily restricted net assets			135,234	28	138,620
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			2,841,067	33	2,537,210
	34	Total liabilities and net assets/fund balances			10,475,459	34	10,063,128

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	66,125,157
2	Total expenses (must equal Part IX, column (A), line 25)	2	66,429,014
3	Revenue less expenses Subtract line 2 from line 1	3	-303,857
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,841,067
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,537,210

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization INTERNATIONAL REPUBLICAN INSTITUTE	Employer identification number 52-1340267
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	81,724,752	96,131,650	85,478,428	75,493,223	66,210,857	405,038,910
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	81,724,752	96,131,650	85,478,428	75,493,223	66,210,857	405,038,910
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						405,038,910

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	81,724,752	96,131,650	85,478,428	75,493,223	66,210,857	405,038,910
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	56,212	5,979	920	1,331	1,114	65,556
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						405,104,466
12 Gross receipts from related activities, etc (See instructions)					12	27,319
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	99 980 %
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	99 970 %
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area
☐ Protection of natural habitat☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		632,058	456,331	175,727
d Equipment		1,000,765	944,586	56,179
e Other		333,401	209,241	124,160
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				356,066

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	166,125,157
2	Total expenses (Form 990, Part IX, column (A), line 25)	266,429,014
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-303,857
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-303,857

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	166,749,423
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	
b	Donated services and use of facilities2b528,427	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d95,839	
e	Add lines 2a through 2d	2e624,266
3	Subtract line 2e from line 1	366,125,157
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b	4c0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	566,125,157

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	167,053,280
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a528,427	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d95,839	
e	Add lines 2a through 2d	2e624,266
3	Subtract line 2e from line 1	366,429,014
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b	4c0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	566,429,014

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	IRI IS GENERALLY EXEMPT FROM FEDERAL INCOME TAX UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, IRI QUALIFIES FOR THE CHARITABLE CONTRIBUTIONS DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. IRI HAD NO NET UNRELATED BUSINESS INCOME FOR THE YEARS ENDED SEPTEMBER 30, 2012 AND 2011. IRI FOLLOWS THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, IRI MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED IRI'S TAX POSITIONS AND CONCLUDED THAT IRI HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY, IRI IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2009.
PART XII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES REPORTED ON LINE 8B 95,839
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES REPORTED ON LINE 8B 95,839

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes

☐ No

2

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3

Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
CENTRAL AMERICA AND THE CARIBBEAN -	1	8	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	1,324,474
CENTRAL AMERICA AND THE CARIBBEAN -			GRANTMAKING		128,039
EAST ASIA AND THE PACIFIC -	7	48	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	5,500,564
EAST ASIA AND THE PACIFIC -			GRANTMAKING		1,470,013
EUROPE (INCLUDING ICELAND & GREENLAND) -	4	20	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	1,947,462
EUROPE (INCLUDING ICELAND & GREENLAND) -			GRANTMAKING		5,000
MIDDLE EAST AND NORTH AFRICA -	6	40	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	10,322,468
MIDDLE EAST AND NORTH AFRICA -			GRANTMAKING		764,425
NORTH AMERICA - CANADA AND MEXICO, BUT	1	5	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	390,552
RUSSIA & THE NEWLY INDEPENDENT STATES -	7	39	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	4,398,088
RUSSIA & THE NEWLY INDEPENDENT STATES -			GRANTMAKING		49,146
SOUTH AMERICA - ARGENTINA, BOLIVIA,	3	15	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	3,583,973
SOUTH AMERICA - ARGENTINA, BOLIVIA,			GRANTMAKING		191,571
SOUTH ASIA - AFGHANISTAN, BANGLADESH,	2	38	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	2,969,891
SOUTH ASIA - AFGHANISTAN, BANGLADESH,			GRANTMAKING		525,034
SUB-SAHARAN AFRICA - ANGOLA,	7	65	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	8,946,161
SUB-SAHARAN AFRICA - ANGOLA,			GRANTMAKING		294,954
3a Sub-total	18	116			21,462,445
b Total from continuation sheets to Part I	20	162			21,349,370
c Totals (add lines 3a and 3b)	38	278			42,811,815

[illegible]**Schedule F (Form 990) 2011**

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☒

Yes

☐

No

Part V

Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 IRI EVALUATES FINANCIAL RISK AND PERFORMS MANAGEMENT ASSESSMENT OF GRANTEES MONITORING IS ESTABLISHED BASED ON RISK FACTORS GRANTEES SUBMIT NARRATIVE AND FINANCIAL REPORTS ACCORDING TO ESTABLISHED SCHEDULE PERFORMANCE IS EVALUATED AND MONITORED REGULARLY PROGRAM STAFF PERFORMS ON-SITE VISITS TO EVALUATE PROGRAM ACTIVITIES FIELD OFFICES REPORT FINANCIAL TRANSACTIONS ON A MONTHLY BASIS FINANACIAL OVERSIGHT IS PROVIDED BY A REGIONAL ACCOUNTANT IN THE FIELD AND HQ ACCOUNTING DEPARTMENT IN DC PROGRAM AND FINANCIAL STAFF VISIT FIELD OFFICE ON A REGULAR BASIS

Identifier	Return Reference	Explanation
		SCHEDULE F, PART IV, LINE 6 THE ORGANIZATION HAS FILED FORM 5713 UNDER SEPARATE COVER TO THE IRS THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 990-T

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐

Mail solicitations

b

☐

Internet and e-mail solicitations

c

☐

Phone solicitations

d

☐

In-person solicitations

e

☒

Solicitation of non-government grants

f

☒

Solicitation of government grants

g

☒

Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THE EUDY COMPANY 4200 MASSACHUSETTS AVE NW 312 WASHINGTON, DC 20016	FREEDOM AWARD DINNER		No	337,782	30,000	307,782
REBECCA POSEY 240 N HIGHLAND AVE NE ATLANTA, GA 30307	STRATEGY DEVELOPMENT		No	8,365	1,500	6,865
Total ▶				346,147	31,500	314,647

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1 FREEDOM AWARD DINNER 2011 (event type)	(b) Event #2 JEANE J. KIRKPATRICK AWARD LUNCHEON (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
	1	Gross receipts	337,782	8,365		346,147
	2	Less Charitable contributions	311,382	7,446		318,828
	3	Gross income (line 1 minus line 2)	26,400	919		27,319
Direct Expenses	4	Cash prizes	3,276			3,276
	5	Non-cash prizes . . .				
	6	Rent/facility costs . . .	12,540	5,171		17,711
	7	Food and beverages . . .	47,497	6,594		54,091
	8	Entertainment				
	9	Other direct expenses .	19,496	1,265		20,761
	10	Direct expense summary Add lines 4 through 9 in column (d)				(95,839)
	11	Net income summary Combine lines 3 and 10 in column (d)				-68,520

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses . . .				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d)						()
8 Net gaming income summary Combine lines 1 and 7 in column (d)						

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
EXPLANATION OF FUNDRAISING PAYMENTS	SCHEDULE G, PART I, LINE 2B, COLUMN (V)	PAYMENTS ARE MADE TO THE FUNDRAISER FOR PROFESSIONAL SERVICES RELATED TO THE FUNDRAISING ACTIVITY
SPECIAL EVENT DETAIL	SCHEDULE G, PART II	EVENT #1 IRI'S FREEDOM AWARD DINNER 2011 HONORING FORMER SECRETARIES OF STATE, JAMES A BAKER AND LAWRENCE EAGLEBURGER WAS HELD ON NOVEMBER 10, 2011 SOME REVENUE AND EXPENSE HAVE BEEN REPORTED IN PRIOR 990 FILINGS EVENT #2 THE JEAN J KIRKPATRICK AWARD RECOGNIZES WOMEN WHO MAKE OUTSTANDING CONTRIBUTIONS TO WOMEN IN POLITICS AND CIVIL SOCIETY IRI'S WOMEN'S DEMOCRACY NETWORK PRESENTED THIS AWARD ON MARCH 8, 2012

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LORNE W CRANER	(i)	202,673	0	690	37,500	20,366	261,229	0
	(ii)	0	0	0	0	0	0	0
(2) JUDY VAN REST	(i)	165,836	0	3,810	33,500	9,567	212,713	0
	(ii)	0	0	0	0	0	0	0
(3) THOMAS E GARRETT	(i)	136,013	0	2,763	30,500	9,001	178,277	0
	(ii)	0	0	0	0	0	0	0
(4) DANIEL W FISK	(i)	133,430	0	690	14,000	8,443	156,563	0
	(ii)	0	0	0	0	0	0	0
(5) SONYA VEKSTEIN	(i)	152,607	0	690	32,356	18,966	204,619	0
	(ii)	0	0	0	0	0	0	0
(6) JOHANNA KAO	(i)	92,976	0	86,401	9,425	7,098	195,900	0
	(ii)	0	0	0	0	0	0	0
(7) HANZ HOLZEN	(i)	102,145	0	51,609	10,292	6,712	170,758	0
	(ii)	0	0	0	0	0	0	0
(8) JAN SUROTCHAK	(i)	104,412	0	40,908	10,706	16,013	172,039	0
	(ii)	0	0	0	0	0	0	0
(9) PAUL MCCARTHY	(i)	84,898	0	55,272	8,755	15,882	164,807	0
	(ii)	0	0	0	0	0	0	0
(10) STEPHEN NIX	(i)	126,594	6,477	1,290	12,955	15,402	162,718	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	SOME RESIDENT COUNTRY DIRECTORS RECEIVED HOUSING ALLOWANCE, WHICH IS TAXABLE

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	IT IS IRI'S POLICY THAT THE AUDIT COMMITTEE OF IRI'S BOARD OF DIRECTORS REVIEWS IRS FORM 990 BEFORE IT IS FILED ON THE ORGANIZATION'S BEHALF BY ITS INDEPENDENT AUDIT FIRM A BOARD RESOLUTION IS NOT REQUIRED IN ORDER FOR THE FORM 990 TO BE FILED THE MEANS OF DELIVERY SHALL BE VIA EMAIL TO EACH AUDIT COMMITTEE MEMBER A PROMPT REPLY MESSAGE FROM THE CHAIRMAN OF THE AUDIT COMMITTEE STATING THAT THE COMMITTEE HAS NO OBJECTION TO AUDIT FIRM'S FILING THE IRS FORM
	FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES ARE TO MAINTAIN A HIGH STANDARD OF ETHICAL BUSINESS PRACTICES IN ALL INSTITUTE OPERATIONS ACTIVITIES, ACTIONS, OR BUSINESS INTERESTS THAT JEOPARDIZE OR OVERLAP THE INTERESTS OF THE INSTITUTE ARE A BASIS FOR CONFLICT AND ARE PROHIBITED TO AVOID ANY POTENTIAL CONFLICTS OF INTEREST, EMPLOYEES ARE PROHIBITED FROM ENGAGING IN ANY OUTSIDE ACTIVITIES OR EMPLOYMENT THAT MAY MATERIALLY INTERFERE WITH THE EFFECTIVE PERFORMANCE OF INSTITUTE RESPONSIBILITIES OR WHICH CLEARLY ARE NOT COMPATIBLE WITH THE INSTITUTE'S BEST INTERESTS THE PRESIDENT SHOULD BE NOTIFIED IMMEDIATELY OF ANY POTENTIAL CONFLICTS OF INTEREST IRI DOES NOT PROHIBIT THE HIRING OF INDIVIDUALS RELATED TO EXISTING IRI STAFF HOWEVER, SUCH INDIVIDUALS CANNOT BE CONSIDERED FOR POSITIONS WHERE THE HIRING DECISION WOULD BE MADE BY A RELATIVE IN ADDITION, RELATIVES MAY NOT WORK IN POSITIONS THAT WOULD ENTAIL A SUPERVISOR/SUBORDINATE RELATIONSHIP
	FORM 990, PART VI, SECTION B, LINE 15	THE CHAIR OF THE COMPENSATION COMMITTEE OF IRI'S BOARD REVIEWED THE COMPARABILITY OF DATA FOR THE COMPENSATION LEVELS OF IRI'S PRESIDENT AND ALL OTHER OFFICERS, INTERVIEWED ALL OFFICERS AND PRESENTED HIS FINDINGS TO THE FULL BOARD FOR DISCUSSION AND APPROVAL
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST
	FORM 990, PART XII, LINE 2C	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS
THE NUMBER OF VOLUNTEERS	FORM 990, PART I, LINE 6	NUMBER OF VOLUNTEERS IS BASED ON IN-KIND CONTRIBUTIONS RECOGNIZED FOR FISCAL YEAR 2012

Additional Data

Software ID:
Software Version:
EIN: 52-1340267
Name: INTERNATIONAL REPUBLICAN INSTITUTE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services				
(Code) (Expenses \$	44,046,798	including grants of \$	3,428,181) (Revenue \$
OTHER PROGRAM SERVICES IRI HAS PROJECTS ONGOING THROUGHOUT THE WORLD OTHER SIGNIFICANT PROGRAM SERVICES INCLUDE WORK IN NIGERIA, AND SUDAN				

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SENATOR JOHN MCCAIN CHAIRMAN	1 00	X		X				0	0	0
RICHARD S WILLIAMSON VICE CHAIRMAN	1 00	X		X				0	0	0
J WILLIAM MIDDENDORF II SECRETARY/TREASURER	1 00	X		X				0	0	0
THOMAS M BARBA GENERAL COUNSEL	1 00	X		X				0	0	0
GAHL HODGES BURT DIRECTOR	1 00	X						0	0	0
REPRESENTATIVE DAVID DREIER DIRECTOR	1 00	X						0	0	0
FRANK J FAHRENKOPF JR DIRECTOR	1 00	X						0	0	0
ALISON B FORTIER DIRECTOR	1 00	X						0	0	0
REPRESENTATIVE KAY GRANGER DIRECTOR	1 00	X						0	0	0
CHERYL F HALPERN DIRECTOR	1 00	X						0	0	0
AL HOFFMAN DIRECTOR	1 00	X						0	0	0
WILLIAM J HYBL DIRECTOR	1 00	X						0	0	0
SENATOR MARK KIRK DIRECTOR	1 00	X						0	0	0
JIM KOLBE DIRECTOR	1 00	X						0	0	0
MICHAEL KOSTIW DIRECTOR	1 00	X						0	0	0
TAMI LONGABERGER DIRECTOR	1 00	X						0	0	0
PETER T MADIGAN DIRECTOR	1 00	X						0	0	0
JANET MULLINS GRISSOM DIRECTOR	1 00	X						0	0	0
CONSTANCE BERRY NEWMAN DIRECTOR	1 00	X						0	0	0
ALEC L POITEVINT II DIRECTOR	1 00	X						0	0	0
JOHN FW ROGERS DIRECTOR	1 00	X						0	0	0
RANDY SCHEUNEMANN DIRECTOR	1 00	X						0	0	0
JOSEPH R SCHMUCKLER DIRECTOR	1 00	X						0	0	0
BRENT SCOWCROFT DIRECTOR	1 00	X						0	0	0
GORDON SMITH DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARGARET TUTWILER DIRECTOR	1 00	X						0	0	0
OLIN L WETHINGTON DIRECTOR	1 00	X						0	0	0
LINDSEY GRAHAM DIRECTOR	1 00	X						0	0	0
LORNE W CRANER PRESIDENT	40 00			X				203,363	0	57,866
JUDY VAN REST EXECUTIVE VICE PRESIDENT	40 00			X				169,646	0	43,067
THOMAS E GARRETT VICE PRESIDENT FOR PROGRAMS	40 00			X				138,776	0	39,501
DANIEL W FISK VICE PRESIDENT FOR POLICY AND STRATEGIC PLANNING	40 00			X				134,120	0	22,443
SONYA VEKSTEIN CHIEF OPERATIONS OFFICER	40 00			X				153,297	0	51,322
SABINA AGARUNOVA CHIEF FINANCIAL OFFICER	40 00			X				103,398	0	32,839
JOHANNA KAO RESIDENT COUNTRY DIRECTOR	40 00					X		179,377	0	16,523
HANZ HOLZEN RESIDENT COUNTRY DIRECTOR	40 00					X		153,754	0	17,004
JAN SUROTCHAK RESIDENT COUNTRY DIRECTOR	40 00					X		145,320	0	26,719
PAUL MCCARTHY RESIDENT COUNTRY DIRECTOR	40 00					X		140,170	0	24,637
STEPHEN NIX REGIONAL PROGRAM DIRECTOR	40 00					X		134,361	0	28,357

Additional Data

Software ID:
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EIN: 52-1340267
Name: INTERNATIONAL REPUBLICAN INSTITUTE

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN -	STRENGTHEN INDEPENDENT MEDIA	100,000	BANK WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF CIVIL SOCIETY	28,039	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	INCREASE POLITICAL PARTICIPATION IN SOUTHEAST ASIA	232,227	BANK WIRE			

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(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC -	INCREASE POLITICAL PARTICIPATION OF YOUTH IN SOUTHEAST ASIA	225,778	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	INCREASE POLITICAL PARTICIPATION OF WOMEN IN SOUTHEAST ASIA	8,986	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT FOR OPEN AND TRANSPARENT ELECTIONS IN SOUTHEAST ASIA	181,929	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC -	INCREASING WOMEN'S CIVIC PARTICIPATION	78,770	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	INCREASING CITIZEN POLITICAL PARTICIPATION	147,738	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF CIVIL SOCIETY IN SOUTHEAST ASIA	17,500	BANK WIRE			

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		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF CIVIL SOCIETY IN SOUTHEAST ASIA	40,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF CIVIL SOCIETY IN SOUTHEAST ASIA	200,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	14,990	BANK WIRE			

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		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	13,100	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	15,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	15,000	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	14,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF NORTH ASIAN CIVIL SOCIETY	14,995	BANK WIRE			
		EAST ASIA AND THE PACIFIC -	SUPPORT THE REPORTING OF HUMAN RIGHTS VIOLATIONS	250,000	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA -	INCREASE POLITICAL PARTICIPATION OF MARGINALIZED GROUPS	464,613	BANK WIRE			
		MIDDLE EAST AND NORTH AFRICA -	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF POLITICAL PARTIES	299,812	BANK WIRE			
		RUSSIA & THE NEWLY INDEPENDENT STATES -	INCREASE POLITICAL PARTICIPATION OF YOUTH	49,146	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA - ARGENTINA, BOLIVIA,	STRENGTHEN INDEPENDENT MEDIA	191,571	BANK WIRE			
		SOUTH ASIA - AFGHANISTAN, BANGLADESH,	SUPPORT THE ORGANIZATIONAL CAPACITY-BUILDING OF POLITICAL PARTIES	525,034	BANK WIRE			
		SUB-SAHARAN AFRICA - ANGOLA,	SUPPORT THE ELECTION AND DEMOCRATIC PROCESS	120,000	BANK WIRE			

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		SUB-SAHARAN AFRICA - ANGOLA,	SUPPORT THE ELECTION AND DEMOCRATIC PROCESS	140,000	BANK WIRE			
		SUB-SAHARAN AFRICA - ANGOLA,	SUPPORT THE PROMOTION OF AN OPEN SOCIETY BASED ON THE RULE OF LAW AND DEMOCRATIC GOVERNANCE	34,953	BANK WIRE			